



## **Mental Health Policies and Protections for Work from Home Professionals**

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### **Executive Summary**

- As a consequence of the COVID-19 pandemic, a record number of companies chose to make the shift to work from home. While preferred by many, work from home has also had serious negative implications for our mental health: social isolation, depression and anxiety. There is, therefore, a growing need for sharing good practices and finding ways in which employers can promote the well-being and mental health of their employees as we gradually adjust to a new normal.
- According to our survey on the mental health implications of the pandemic on work from home professionals, mental health is still a taboo in many communities and companies, despite recent progress. Seeking out support on mental health struggles is made even more difficult by inaccessible services and uncertainty about whom to turn to on issues of mental health.
- Promoting the mental health of employees requires both company- and society-level measures. The focus needs to be on prevention, making services accessible and erasing stigma around mental health. By giving employees more control over their time and offering wellness programmes, companies can help reduce work-related stress, assist employees in building a healthy work-life balance and create a company culture where everyone's well-being is both valued and actively supported.

## Introduction

Work from home can bring both positive and negative things<sup>1</sup>. However, it is only a setting and there are far more factors that impact employee well-being. These include available support and mental health provision<sup>2</sup>, as suggested by many studies<sup>3</sup>. Studies also point to a link between mental well-being and job retention and employee productivity across the globe<sup>4</sup>. Even though research and knowledge on such mental health-related issues have existed pre-COVID-19, they have in many cases not been addressed properly. Because of the crisis, work-related mental health struggles have been brought into the public, making organizations and communities all over the world reassess what they could do to promote the mental well-being of the working population.

Unfortunately, mental health is still a very stigmatised topic<sup>5</sup> in many places. This can cause people who struggle with it and do not receive proper support to change jobs<sup>6</sup> more frequently and experience socio-economic problems, often resulting in further negative impacts on their health. During COVID-19, employees have scrambled to adjust to a new normal: facing anxiety, depression, a decreased focus, and reported signs of compassion fatigue and burnout. To combat employee ill-health and to keep problems from extending to all aspects of their lives, preemptive and proactive care and mechanisms should be explored and developed<sup>7</sup>. This is better not only for the people themselves and their relationships but in the long-term also for the economy<sup>8</sup>.

This policy brief summarizes the outcomes of the ‘Adjustment Manual: Work from Home Edition’ project. The project was carried out by a team of Asian and European youth as a part of the 4th ASEF Young Leaders Summit. Considering the shift that happened during the pandemic that led people to adapt to a new work environment, a different set of duties and even changes in

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<sup>1</sup> Gascoigne, D. (2020). *Working from home: assessing the research evidence*. Chartered Institute of Personnel and Development, UK; Lazzarin, Jacopo (2021), Issues and opportunities of remote work for young people. European Student Think Tank. June 22, 2021.

<sup>2</sup> Bulińska-Stangrecka, H., & Bagińska, A. (2021). The role of employee relations in shaping job satisfaction as an element promoting positive mental health at work in the era of COVID-19. *International Journal of Environmental Research and Public Health*, 18(4), 1903.

<sup>3</sup> Goldman, M. L., Druss, B. G., Horvitz-Lennon, M., Norquist, G. S., Kroeger Ptakowski, K., Brinkley, A., ... & Dixon, L. B. (2020). Mental health policy in the era of COVID-19. *Psychiatric Services*, 71(11), 1158-1162.

<sup>4</sup> Khan, K. I., Niazi, A., Nasir, A., Hussain, M., & Khan, M. I. (2021). The Effect of COVID-19 on the Hospitality Industry: The Implication for Open Innovation. *Journal of Open Innovation: Technology, Market, and Complexity*, 7(1), 30; Sasaki, N., Kuroda, R., Tsuno, K., & Kawakami, N. (2020). Workplace responses to COVID-19 associated with mental health and work performance of employees in Japan. *Journal of occupational health*, 62(1), e12134.

<sup>5</sup> Bishop, P. (2016). Reducing the cost of mental health problems at work—what can companies do?. *Human Resource Management International Digest*.

<sup>6</sup> Rai, S. (2015). Organizational justice and employee mental health’s moderating roles in organizational identification. *South Asian Journal of Global Business Research*.

<sup>7</sup> See e.g. United Nations. (2020). Policy Brief: COVID-19 and the Need for Action on Mental Health. United Nations.

<sup>8</sup> OCDE/UE. (2018). *Health at a Glance: Europe 2018: State of Health in the EU Cycle*.

their financial situations, we aim to explore what mechanisms are in place to support the well-being of employees. Through an extensive literature review and an in-depth survey collected from work from home individuals, we aim to identify good practices and develop recommendations for better mental health protections in the workplace.

The objective of the project is to promote better mental health policies for all workplaces in Asia and Europe, involving employees and employers from both government and non-government organisations, private and business sectors, and humanitarian sectors. This policy brief will be disseminated to ASEM governments, suggesting policy considerations to mitigate the potential negative impacts of COVID-19 and work from home on employees' mental health.

## **Approach**

Following the thorough review of mental health research and policy papers and taking into consideration both the possibilities and limits of quantitative research, we designed an online survey to explore the causalities between the COVID-19 pandemic and mental health among working professionals. Aiming to answer our research questions, the survey collected primary data to operationalize the causalities between the pandemic and mental health concerns.

The survey was based on three pillars:

1. **Pillar 1** focused on the respondents' work routine, available support network, and ability to cope with challenges.
2. **Pillar 2** focused on the impact of culture and social relationships on the respondents' views and notions of mental health.
3. **Pillar 3** focused on their perspectives on the responsibility, availability, and helpfulness of different stakeholders from their community in supporting them with their mental health.

Both internal and external factors were included to observe the complexity of our topic. This shifted attention to more nuanced questions, such as culture and social relationships, rather than focusing solely on individuals' experience of working from home. Multiple-choice questions, Likert scale questions, and questions with short open answers were all included in the survey.

Our study utilized a quantitative research method - an online survey questionnaire - with a convenient sampling method. It was rolled out through the ASEFEdu and our project Facebook pages between September 1 and October 20, 2021. It was also distributed on Instagram and LinkedIn. The target audience for the survey were work-from-home individuals employed by either the private or public sector in Asia and Europe.

We received 36 responses through Google Forms. The respondents were between the ages of 20 and 48, representing 15 nationalities. 75% were Asian and 22% European. A majority, 89% of the respondents, were employed. 50% identified themselves as working at a large company. The rest were quite evenly distributed between medium, small and micro-enterprises. As the number of responses was rather low, we need to be careful not to make far-reaching generalisations based only on the survey, but instead, evaluate the results alongside previous literature.

All answers were anonymous and confidential, and respondents had the option to skip certain sections of the survey and leave the survey at any time should they have not felt comfortable answering the questions. After the primary data collection was completed, we cleaned up the data and employed descriptive statistical analysis to identify key findings before formulating recommendations.

## **Findings**

The survey results indicate that 97% of our respondents put the onus of taking care of mental health on themselves. Family members and employers are seen as partly responsible. To cope with mental health struggles, many prefer to spend time resting by themselves, meditating and sleeping. While finding distractions in for example books and movies is common, others like to take a more active approach: doing exercise, talking to friends and family, and generally staying busy.

When asked at what point they would seek help for mental health struggles, a majority of our respondents found it difficult and said that they would go quite a while without outside help. If, however, the struggles became unbearable to handle and started to affect their daily life, many would eventually look to others for help. This preference to deal with mental health issues on their own, in conjunction with the concern of many of our respondents on how to communicate challenges to their team members and bosses (67%), can result in increased anxiety, fatigue and feelings of inadequacy among employees.

According to our survey, employers are not the best stakeholder to implement mental health programmes for their employees. Half of our respondents' trust support programmes provided by external stakeholders more, whereas only 8% place the most trust in programmes provided by their employers. This finding is not surprising considering that previous literature has identified stigma regarding mental health within the workplace<sup>9</sup>.

Our data confirm this with more than half of our respondents (58%) not feeling comfortable talking about their mental health at work. In turn, 39% would reach out to friends first for mental health support. This is followed by 31% who would feel most comfortable talking to family.

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<sup>9</sup> Stuart, H. (2004). Stigma and work. *Healthcare Papers*, 5(2), 100-111.

Within the work community, our respondents are most open to discussing mental health with coworkers (39%). In the open answers, speaking about challenges with coworkers was seen both as a way of expressing feelings of frustration and seeing if others in a comparable position were dealing with similar issues.

While there are still apprehensions about talking about mental health, some of our respondents mention that in recent years these discussions have become more common. Erasing the stigma around mental health is, nonetheless, still a work-in-progress in many societies. This at least in part explains why social media and close friend groups stand out as the networks where people are more willing to talk about their mental health: in the first, there is the possibility of anonymity and the second a mutual feeling of trust. As the stigma around mental health can stop people from seeking help<sup>10</sup>, possibly marking problems worse, getting rid of them should be made a priority on all levels of society.

Despite its importance for maintaining life quality and work capacity, support for mental health is scarce. More than half of our respondents (56%) said that, if needed, they would not find access to a psychiatrist in their community easily. 44% responded that they do not have contacts with stakeholders, such as labor unions, government offices, insurance companies, and non-profit organizations, who can provide them with mental health support. There is still much to be done to provide clear care pathways and low threshold mental health services that everyone, regardless of employment status and income level, has access to.

## **Key Recommendations**

### **Company-level measures to help employees**

Our survey indicates that many employees prefer to cope with mental health struggles by doing things they like and resting. Company-level mental health measures should, therefore, increase employee control over their time, so that they can effectively resolve minor challenges with their mental health through these personal strategies. A 2010 systematic review on flexible working conditions and their effects on employee health and well-being validates this by showing that the opportunity to self-schedule shifts was associated with notable improvements in mental health. Interestingly, flexitime was not significantly associated with such improvements.<sup>11</sup>

Companies should also adopt policies on when employees are expected to respond to digital communication. Creating a company culture where employees' free time is respected, allowing

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<sup>10</sup> Cheng, H.-L., Wang, C., McDermott, R. C., Kridel, M., & Rislin, J. L. (2018). Self-Stigma, Mental Health Literacy, and Attitudes Toward Seeking Psychological Help. *Journal of Counseling & Development*, 96(1), 64-74.

<sup>11</sup> Joyce, K., Pabayo, R., Critchley, J. A. & Bambra, C. (2010). Flexible working conditions and their effects on employee health and wellbeing. *Cochrane database of systematic reviews 2*.

them to log out from work, is especially important when working remotely to reduce stress and maintain a healthy work-life balance<sup>12</sup>.

Despite initially raised fears of decreasing global mental health indicators, people's behaviour during the pandemic showed resilience<sup>13</sup>. In many surveys, many working professionals are shown to prefer to work from home only, or at least in a hybrid way<sup>14</sup>. The advantages seem to outweigh the disadvantages. There is no one size fits all, however<sup>15</sup>. We can not turn our backs completely on on-site work, despite economic incentives, but instead, companies must ensure that the needs of employees who see particular benefits in office-first work are also met<sup>16</sup>. These include, for instance, getting energy from brainstorming, networking, and having informal breaks with colleagues.

After carrying out the necessary performance analyses, companies should offer their employees the flexibility to choose either working from home or the office, while ensuring that it will not decrease work efficiency, productivity, and performance. The practice should be steered through an inclusive policy formed by all stakeholders of the company. When returning to the office after the pandemic, employees should be given support on regaining a healthy work-life balance.

Furthermore, studies suggest the effectiveness of workplace wellness activities in improving employees' mental health. Office worksite-based yoga programmes have been shown to reduce anxiety in participants with high adherence<sup>17</sup>. Workplace exercise interventions, on the other hand, may help prevent depression. A 10-week in-company fitness programme, which consisted of two supervised training sessions per week, for example, was shown to reduce the risk of depression in the treatment group<sup>18</sup>. By implementing these programmes, employers can help mitigate, or even prevent, the onset of work-related mental health issues<sup>19</sup>, rather than waiting for

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<sup>12</sup> Chartered Institute of Personnel and Development (2021). Coronavirus (COVID-19): Mental health support for employees. Chartered Institute of Personnel and Development, UK.

<sup>13</sup> Polizzi, C., Lynn, S. J., & Perry, A. (2020). Stress and coping in the time of COVID-19: pathways to resilience and recovery. *Clinical Neuropsychiatry*, 17(2).

<sup>14</sup> See e.g. Parker, K., Horowicz, J. M. & Minkin, R. (2020). *How the Coronavirus Outbreak Has – and Hasn't – Changed the Way Americans Work*. Pew Research Center.

<sup>15</sup> Milasi S., González-Vázquez I. & Fernandez-Macias, E. (2020). *Telework in the EU before and after the COVID-19: where we were, where we head to*. JRC Science for Policy Brief.

<sup>16</sup> See e.g. Gascoigne, D. (2020). *Working from home: assessing the research evidence*. Chartered Institute of Personnel and Development, UK.

<sup>17</sup> Cheema, B. S., Houridis, A., Busch, L., Raschke-Cheema, V., Melville, G. W., Marshall, P. W., ... & Colagiuri, B. (2013). Effect of an office worksite-based yoga program on heart rate variability: outcomes of a randomized controlled trial. *BMC Complementary and Alternative Medicine*, 13(82).

<sup>18</sup> de Zeeuw, E. L., Tak, E. C., Dusseldorp, E., & Hendriksen, I. J. (2010). Workplace exercise intervention to prevent depression: a pilot randomized controlled trial. *Mental Health and Physical Activity*, 3(2), 72-77.

<sup>19</sup> While they are often good for supporting relaxation and relieving stress, they should not be seen as the primary tool for promoting mental health in the workplace. In conjunction with other mechanisms, however, they can be helpful and give good results. See e.g. Haddon, J. (2018). The impact of employees' well-being on performance in the workplace. *Strategic HR Review*, 17(2), 72-75.

them to incur additional healthcare costs to be borne both by the employee and the company. Social distancing measures and work-from-home arrangements can make taking part in these programmes more difficult, however, and in parts impossible. More research needs to be conducted on the effectiveness of such prevention measures in a remote setting.

### **Society-level measures to help employees**

Instead of designing and implementing mental health programmes for their employees on their own, many employers would do better outsourcing these tasks to third parties. They still have an important role to play in supporting their employees' well-being, however, and they can do this by financing existing programmes available in their local communities and actively providing information about these opportunities. In communities where access to psychiatrists is limited, they can participate in creating new programmes as part of a larger collective.

Making it easier for employees to access professional help, especially by offering trustworthy external, evidence-based mental health services, should be impactful. We should work hard to achieve “parity of esteem”, meaning that those dealing with mental health issues should have equal access to treatment as those with physical illnesses<sup>20</sup>. Online cognitive behaviour therapy (eCBT), for example, has been proven to reduce anxiety and other stress-related mental health indicators significantly and is, therefore, a very practical and effective way of offering work from home individuals with professional support<sup>21</sup>. To lower the threshold of seeking help for mental health struggles even further, companies can choose to provide subsidies to employees going to counselling.

All in all, mental health resources should be made more accessible. Services should be easily found by those in need of support and be evaluated regularly to ensure that they meet the needs present in the community. The obstacles to seeking help for mental health issues in specific communities should be pinpointed so that local actors can formulate a shared strategy for tackling them. Making seeking help as simple as possible by investing in walk-in mental health clinics should be prioritized. By lowering the threshold, it is possible to encourage even those who would not normally feel comfortable talking about mental health to seek specialist support.

During the COVID-19 pandemic, many campaigns were established to draw attention to the global mental health crisis that was intensified by restrictions, such as social distancing and increased work from home. After the pandemic has passed, communities should continue to raise awareness of these issues, focusing in particular on addressing stigma. In this era of digital

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<sup>20</sup> Aknin, L. B., De Neve, J. E., Dunn, E. W., Fancourt, D., Goldberg, E., Helliwell, J., ... Amor, Y. B. (2021). *Mental Health During the First Year of the COVID-19 Pandemic: A Review and Recommendations for Moving Forward*.

<sup>21</sup> Ibid.

communication, attention should be paid to providing evidence-based information also on social media.

Our study has highlighted key challenges and respective solutions in the effort to make the work from home experience more mentally supportive. Only when these practices are implemented can we resolve the existing conflict of efficiency vs. self-care, one that need not exist in the first place and ensure the long-term, holistic care of our professionals. While the pandemic itself, and such restrictions, have eased recently, the relevance of protecting mental health rights through systemic policy changes should continue to be a priority of institutions everywhere.

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Survey Q. 73: “If you have never received any mental health support before, what kind of support would you find helpful for you and/or your community?”



